# **Meeting Report**

# 43rd National Congress of the Italian Psychiatric Association— Consensus Conference: 'Non-Conventional Medicines'

# October 19-24, 2003, Palazzo della Cultura e dei Congressi, Bologna, Italy

## Paolo Roberti MD

Chairman, Department of Mental Health, Health Local Unit, Bologna, Italy

# **Foreword**

The Italian Republic protects health as a fundamental right of the individual, safeguards the principle of scientific pluralism and ensures the freedom of choice of treatments by individuals and the professional qualification of health operators, with special focus on the independence of doctors as regards the choice of treatments (Supreme Court, 4th Section, Sentence no. 301, February 8, 2001).

The right of choice that every person is acknowledged as having as a focal point of every modern consideration of the respect of the will of individuals for their own state of health and sickness has already been explicitly expressed and has taken on concrete shape through increasingly larger sections of the population resorting to a number of treatments and therapeutic practices known under the common overall name of 'medicine non convenzionali—non-conventional medicines' (MNC–NCM): acupuncture, homeopathy, phytotherapy, traditional Chinese medicine, anthroposophical medicine, homotoxicology, ayurvedic medicine, chiropractic and osteopathy ('Guidelines for non-conventional medicines', FNOMCeO, Terni, May 18, 2002).

It is generally agreed that no therapeutic and health-restoring methods can disregard the need for a preliminary clinical diagnosis, the responsibility for which appertains only to a doctor with specific competence, who is entitled to use such methods as an integral part of medicine according to science, conscience, competence and skill.

### **Definitions**

The attribute 'non-conventional', despite its being currently the commonest expression used in Italy, would seem to place

For reprints and all correspondence: Paolo Roberti, Via Siepelunga 36/12, 40141 Bologna, Italy. Tel: +39-3358029638; E-mail: p.roberti@fastwebnet.it

these treatment methods in contrast with academic medicine, which is considered to be conventional. It should be remembered in this respect that in the English-speaking world the term CAM (complementary and alternative medicine) is used, and it is crucial to underline the complementary nature of the different possible diagnostic and therapeutic approaches that fall within this field in order to emphasize the integration under way in the health system and the possibility of the practical use of all the information provided by the patient.

Also of crucial importance is the search for, finding and adoption of a common language that, by defining single methodological characteristics in a clear-cut way, favors the exchange of as much information as possible between health operators and researchers, above all in academic spheres. The goal is to appreciate the advantages and limits of each method and to better identify, among a broad range of therapies and treatments and on the basis of the available evidence, which is the most appropriate for the sick patient.

#### Scientific Research

The ethics of the therapeutic integration provided by these methods of treatment having been acknowledged, it is a good idea and necessary to envisage the possibility of accrediting and establishing study and scientific research programs that, while respecting the particular nature of each method, permit the evaluation of their efficacy and the enhancement of their effective therapeutic medical role.

For this purpose, alongside institutional public research, the need is felt for targeted and productive co-operation between industries, companies and medical-scientific societies in the sector to set up suitable research programs through special forms of credit and funding. We might also hope for a greater contribution from public health institutes and departments of medicine to the process of scientific validation of nonconventional medicines currently under way.

© The Author (2005). Published by Oxford University Press. All rights reserved.

The online version of this article has been published under an open access model. Users are entitled to use, reproduce, disseminate, or display the open access version of this article for non-commercial purposes provided that: the original authorship is properly and fully attributed; the Journal and Oxford University Press are attributed as the original place of publication with the correct citation details given; if an article is subsequently reproduced or disseminated not in its entirety but only in part or as a derivative work this must be clearly indicated. For commercial re-use, please contact journals.permissions@oupjournals.org

# **Legal Recognition**

The legislative procedure under way to adapt Italian legislation to the directives of the European Union (European Directives nos 92/73 and 92/74; Resolution no. 75 of the European Parliament dated May 29, 1997: 'Status of non-conventional medicines'; Resolution no. 1206 of the Council of Europe dated November 4, 1999) must allow doctors suitably trained in the individual methods to promote their qualifications, skill and professional training.

#### Information and Media

Health information must be centered on educating the population to acquire healthy habits and behaviors useful for preserving health considered not only as the absence of sickness but also as psychophysical well-being (as laid down by the WHO), as well as the prevention of illnesses and their cure and treatment in case of need.

For non-conventional medicines, the establishment of special regional observatories is suggested, both for the ongoing verification of useful information necessary for the broadcasting of correct and complete information to the public and for documentation and research concerning each individual method, mainly through co-ordination among scientific companies in the sector. The aim is to place at the disposal of the public and health operators independent and qualified surveys of the situation of non-conventional medicine in their area. The results of such surveys can be collected up by a national observatory as a point of reference and co-ordination to generate an overall evaluation that avoids duplicating interventions and ensures cost-effective research.

To protect users, and during the course of the legislative reorganization of the sector, the adoption, on the mandatory basis of criteria agreed with the most authoritative schools and scientific associations for each type of medicine, by all Provincial Colleges of Physicians and Dentists of suitable procedures for recognizing the specific training of their members is acknowledged and expected, representing a guarantee for patients.

## **Informed Consent**

In compliance with the regulations of the Code of Medical Ethics, it is only right to recall the duty concretely to apply, within a free, consensual and informed relationship, the principles of the freedom of choice of treatment by patients and of the freedom of cure by the doctor. The need is therefore confirmed to completely, correctly and clearly inform people in order to develop a relationship between a patient and a doctor, who is thus able to use medicine in a broader sense, considered as a profession exercised in total freedom, and is permitted to use every means considered useful and ethically valid in the interest of the patient and with the patient's approval.

## **Training and Skill**

Although it is acknowledged that universities play a historical role in training, there is no doubt that Italian universities lack the academic staff and the resources required for teaching and researching non-conventional medicine. The training programs currently available are provided mainly by private institutes that have been operating in the sector for years. It can only be hoped, therefore, that universities, in the effort to make up for this training deficiency, help pinpoint and realize co-operation conventions and agreements with the associations and the schools already engaged in research, teaching and verifying the learning of these alternative methods, as a useful contribution toward valorizing the experience acquired. It is to be hoped that such a training integration process will gradually achieve a situation of free competition between private institutes and universities, envisaging, in the initial stages, the inclusion of general informative concepts in the degree courses of departments of medicine and, whenever possible, the organization of elective introductory courses able to foster a better knowledge of non-conventional medicine.

# Lower Expenditure for Medicines and Area Integration

The fact that a large number of patients turn to non-conventional medicine, with total freedom of treatment and without representing a burden for the National Health System, points to a phenomenon that involves all those in this health sector. It follows, then, that the need exists in one way or another to foster co-operation and/or agreements between the various figures involved in this area (GPs, hospital specialists, local health units, paramedic staff, and so on) in order to disseminate a correct, integrated course and adequate information relating to the advantages and limits of such fields of medicine.

#### **Relations with Institutions**

Doctors who are experts in the different types of medicine (suitably indicated by the most representative scientific associations for each type of medicine) must be present and take part on a completely equal standing in terms of roles and functions in the consultative commissions and bodies of the profession, of the Ministry of Health, of the Ministry of Universities and Scientific Research, of patient and consumer associations, toward numerous ends: recognition of qualifications obtained abroad, allocation of resources to research projects, adaptation and integration with already existing organizations and orders, and so on.

#### **Prescription and Treatment Instruments**

In order to avoid requests of a limitative type, which are often made without any real knowledge of the problem, quality, safety and efficacy criteria must be established once and for all relating to the authorization for marketing of the medicines and treatment instruments used for the various branches of therapy. The pinpointing of such criteria, specific to each branch of therapy, must be done on the basis of indications by the most representative and authoritative scientific societies and professional associations for each field.

#### **Conclusions**

We should like to thank the Italian Psychiatric Association, which, as part of its 43rd National Congress in Bologna, organized the first Consensus Conference on Non-Conventional Medicines to be staged in Italy in an academic setting. This Consensus Document is the result of the work of its promoter and of all the signatory associations and schools. Let us hope this event will stimulate the complete integration of similar initiatives in the field of so-called basic medicine and in other fields of medical specialization.

The Consensus Document, shared by the authoritative representatives of non-conventional medicine in Italy convened here today and by doctors and researchers who are experts on the subject, is intended to represent the basis for ongoing unitary action in this sector of medicine, open to all health components, and in the representative seats of the medical profession (FNOMCeO and the Provincial Colleges of Physicians and Dentists), in the Institutions of the Republic (national, regional and territorial), as well as with respect to citizens' associations.

# Signatory Associations, Bodies, Institutes, Schools and Scientific Societies

- Ambulatorio di Omeopatia, Centro di riferimento per l'Omeopatia della Regione Toscana, Ospedale Campo di Marte, ASL 2 Lucca, Dott. Elio Rossi
- Anthropos e Iatria, Associazione Scientifica Internazionale per la Ricerca, lo Studio e lo Sviluppo delle Medicine Antropologiche e Accademia Europea per le Discipline di Frontiera, Genova, *Prof. Paolo Aldo Rossi*
- Associazione Atah Ayurveda, Bologna, Dott. Guido Sartori
- Associazione Italiana di Omeopatia di Risonanza, AIOR, Piacenza, Dott.ssa Giuliana Rapacioli
- Associazione Italiana Pazienti della Medicina Antroposofica, AIPMA, Milano, Adelina Ansante
- Associazione Medica Italiana di Omotossicologia, AIOT, Milano, Dott. Ivo Bianchi
- Associazione Lycopodium-Homeopathia Europea, Scuola di Omeopatia Classica 'Mario Garlasco', Firenze, Dott.ssa Pia Barilli
- Associazione per le Medicine Non Convenzionali in Odontoiatria, AMNCO, Roma, *Dott. Salvatore Bardaro*
- Associazione Nazionale Medici Fitoterapeuti, ANMFIT, Empoli, Dott. Fabio Firenzuoli
- Associazione Pazienti Omeopatici, APO, Napoli, Vega Palombi Martorano
- Associazione per l'Universalità della Medicina, ASSUM, Roma, *Prof. Francesco Macrì*
- Associazione di Ricerche e Studi per la Medicina Antroposofica, ARESMA, Milano, Dott. Angelo Franzini
- Centro Clinico di Medicina Naturale, Centro di riferimento per la Fitoterapia della Regione Toscana, Ospedale S. Giuseppe, ASL 11 Empoli, *Dott. Fabio Firenzuoli*

- Centro Italiano di Studi e Documentazione in Omeopatia, CISDO, Milano, *Dott. Ennio Masciello*
- Centro di Medicina Tradizionale Cinese 'Fior di Prugna', Centro di riferimento per le Medicine Non Convenzionali e la Medicina Tradizionale Cinese della Regione Toscana, ASL 10 Firenze, *Dott.ssa Sonia* Baccetti
- Federazione Italiana delle Associazioni e dei Medici Omeopati, FIAMO, Terni, Dott.ssa Antonella Ronchi
- Federazione Italiana dei Medici Omeopati, FIMO, Roma, Dott. Marco Lombardozzi
- Federazione Italiana delle Società di Agopuntura, FISA, Bologna, *Dott. Carlo Maria Giovanardi*
- Gruppo Medico Antroposofico Italiano, GMAI, Milano, Dott. Giuseppe Leonelli
- Homoeopathia Europea-Internationalis, HEI, Bruxelles, *Dott. Carlo Cenerelli*
- Istituto delle Scienze Bioenergetiche onlus, ISBE, Roma, *Dott.ssa Maria Teresa Elia*
- Istituto di Studi di Medicina Omeopatica, ISMO, Roma, Dott. Gino Santini
- Istituto di Studi di Medicina Omeopatica, ISMO, Reggio Calabria, *Dott.ssa Rosa Femia*
- Istituto Superiore di Medicina Olistica e di Ecologia, ISMOE, Urbino, *Prof. Corrado Bornoroni*
- Liga Medicorum Homoeopathica Internationalis, LMHI, Berna, *Dott. Renzo Galassi*
- Nobile Collegio Omeopatico, NCO, Roma, *Dott.ssa Anna Maria Rigacci*
- Società Italiana di Ecologia, Psichiatria e Salute Mentale, SIEPSM, Imperia, *Dott. Giuseppe Spinetti*
- Società Italiana di Farmacoterapia Cinese e Tradizionale, SIFCeT, Roma, *Dott. Giulio Picozzi*
- Società Italiana di Floriterapia, SIF, Bologna, Dott. Ermanno Paolelli
- Società Italiana di Medicina Omeopatica, SIMO, Palermo, *Dott. Ciro D'Arpa*
- Società Italiana di Omeopatia e Medicina Integrata, SIOMI, Milano, *Dott.ssa Simonetta Bernardini*
- Società Italiana di Omotossicologia e Omeopatia, SIOOM, Carsoli (Aq), *Dott. Luigi Minonzio*
- Società Italiana di Psichiatria Olistica, SIPOl, Bologna, Dott. Ermanno Paolelli
- Società Scientifica Italiana di Medicina Ayurvedica onlus, SSIMA, Milano, *Dott. Antonio Morandi*
- Unione di Floriterapia, UF, Milano, *Dott.ssa Maria* Antonietta Balzola
- Unione di Medicina Non Convenzionale Veterinaria, UMNCV, Bologna, *Dott. Francesco Longo*, *Dott.ssa* Antonella Carteri, *Dott. Andrea Malgeri*
- World Psychiatric Association, Section on 'Ecology, Psychiatry and Mental Health', Imperia, *Dott. Giuseppe Spinetti*